

SERFF Tracking Number: TRGR-125616325 State: Arkansas
Filing Company: Southern Insurance Company State Tracking Number: #302433 \$50
Company Tracking Number: 08-087
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Lead Exclusion Form/08-087

Filing at a Glance

Company: Southern Insurance Company

Product Name: General Liability

SERFF Tr Num: TRGR-125616325 State: Arkansas

TOI: 17.0 Other Liability - Claims
Made/Occurrence

SERFF Status: Closed

State Tr Num: #302433 \$50

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: 08-087

State Status: Fees verified and
received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi, Edith
Roberts, Brittany Yielding

Author: Jerry Mobley

Disposition Date: 05/13/2008

Date Submitted: 05/05/2008

Disposition Status: Approved

Effective Date Requested (New): 07/01/2008

Effective Date (New):

Effective Date Requested (Renewal): 07/01/2008

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Lead Exclusion Form

Status of Filing in Domicile: Authorized

Project Number: 08-087

Domicile Status Comments: Approved

Reference Organization: Insurance Services Office

Reference Number: n/a

Reference Title: n/a

Advisory Org. Circular: n/a

Filing Status Changed: 05/13/2008

State Status Changed: 05/13/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Filing company endorsement, form CG R069, Lead Exclusion.

Company and Contact

Filing Contact Information

Jerry Mobley, Senior Filings Specialist

Jerry.mobley@republicgroup.com

SERFF Tracking Number: *TRGR-125616325* *State:* *Arkansas*
Filing Company: *Southern Insurance Company* *State Tracking Number:* *#302433 \$50*
Company Tracking Number: *08-087*
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Product Name: *General Liability*
Project Name/Number: *Lead Exclusion Form/08-087*

5525 LBJ Freeway (972) 788-6619 [Phone]
Dallas, TX 75240 (972) 788-6609[FAX]

Filing Company Information

Southern Insurance Company CoCode: 19216 State of Domicile: Texas
5525 LBJ Freeway Group Code: 3489 Company Type:
Dallas, TX 75240 Group Name: The Republic Group State ID Number:
(972) 788-6001 ext. [Phone] FEIN Number: 75-6021170

SERFF Tracking Number: TRGR-125616325 *State:* Arkansas
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Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$50.00 form filing fee
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
0000302433	\$50.00	05/05/2008

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	05/13/2008	05/13/2008

SERFF Tracking Number: *TRGR-125616325* *State:* *Arkansas*
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Disposition

Disposition Date: 05/13/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	TRGR-125616325	State:	Arkansas
Filing Company:	Southern Insurance Company	State Tracking Number:	#302433 \$50
Company Tracking Number:	08-087		
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Policyholder Notice	Approved	Yes
Form	Exclusion - Lead	Approved	Yes

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Company Tracking Number:	08-087		
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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Exclusion - Lead	CG R069	12 07	Endorsement/Amendment/Conditions	New		CG R069 1207 Excl - Lead (GL).pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EXCLUSION – LEAD

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

The following exclusion is added to Paragraph 2., **Exclusions of Coverage A – Bodily Injury and Property Damage Liability (Section I – Coverages)** and Paragraph 2., **Exclusions of Coverage B – Personal and Advertising Injury Liability (Section I – Coverages)**.

This insurance does not apply to:

1. "Bodily injury", environmental "property damage" or "personal and advertising injury" which would not have occurred in whole or in part but for the actual, alleged or threatened ingestion, inhalation, absorption of, exposure to, or presence of lead at any time.
2. Any loss, cost or expense arising out of any:
 - (a) Request, demand, order or statutory or regulatory requirement that any insured or others test for, abate, remove, monitor, clean up, contain, treat, detoxify, neutralize, or in any way respond to, or assess the effects of lead; or

- (b) Claim or suit by or on behalf of a governmental authority for damages because of testing for, abating, cleaning up, removing, containing, treating, monitoring, detoxifying or neutralizing or in any way responding to or assessing the effects of lead.

Lead means lead in any form, whether in combination with, an ingredient of, or as a component of any substance or material.

All other terms, conditions, exclusions and provisions of the policy apply.

<i>SERFF Tracking Number:</i>	<i>TRGR-125616325</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Southern Insurance Company</i>	<i>State Tracking Number:</i>	<i>#302433 \$50</i>
<i>Company Tracking Number:</i>	<i>08-087</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>General Liability</i>		
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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status:
Approved 05/13/2008

Comments:

Attachment:

td-1gl-GL Lead Excl form 070108.pdf

Satisfied -Name: Policyholder Notice

Review Status:
Approved 05/13/2008

Comments:

Attachment:

CG R069A 1207 Notice to Policyholders (lead excl).pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only

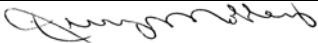
2. Insurance Department Use only	
a. Date the filing is received:	
b. Analyst:	
c. Disposition:	
d. Date of disposition of the filing:	
e. Effective date of filing:	
New Business	
Renewal Business	
f. State Filing #:	
g. SERFF Filing #:	
h. Subject Codes	

3. Group Name	Group NAIC #
Republic Group of Companies	3489

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Southern Insurance Company	Texas	19216	75-6021170	

5. Company Tracking Number	08-087ar
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Jerry Mobley 5525 LBJ Freeway Dallas, TX 75240-6241	State Filings Analyst	972-788-6619	972-788-6909	Jerry.Mobley@republicGroup.com
7. Signature of authorized filer				
8. Please print name of authorized filer		Jerry Mobley		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	17.0000 Commercial General Liability
10. Sub-Type of Insurance (Sub-TOI)	17.0000 Commercial General Liability
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/a
12. Company Program Title (Marketing title)	General Liability
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: July 1, 2008 Renewal: July 1, 2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	Insurance Services Office
17. Reference Organization # & Title	n/a
18. Company's Date of Filing	May 5, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	08-087ar
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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We are filing our company endorsement, Exclusion - Lead, Form number CG R069. This form will be utilized on risks that have a lead exposure. Also provided is a copy of our policyholder notice that will be used in the event of exclusion attachment.

The applicable filing exhibits are attached. If additional information is needed, please contact me.

Thank you for your assistance.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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Check #: 0000302433

Amount: \$50.00

SERFF filing

Check to be mailed separately

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	08-087ar			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	n/a			

3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Exclusion - Lead	CG R069 12 07	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1

Commercial General Liability Notice to Policyholders

This notice contains a general synopsis of an endorsement that is included with your insurance policy.

This notice does not provide coverage, nor does this notice replace any provisions of your new policy. You should read the entire policy and review your declarations page for complete information on the insurance coverage provided, including any applicable exclusions and conditions. If there is a conflict between your new policy and this notice, the provisions of the policy shall prevail.

Lead Exclusion

CG R069 12 07 – Lead Exclusion

Your policy contains an endorsement explaining in more specific terms that coverage under the policy does not apply to “bodily injury”, environmental “property damage”, “personal and advertising injury”, or any loss, cost or expense arising out of lead.